[President]

minds of the members of the particular community that all the view points were not considered so far as the introduction of this Bill is concerned.

The motion that the honourable members whose names were read out may form the members of the Select Committee was then put to vote and carried.

THE TRAVANCORE HINDU WOMEN'S RIGHTS TO PROPERTY BILL.

Mr. G. Narayana Aiyar: Sir, I request that leave may be granted for the introduction of the Travancore Hindu Women's rights to property bill.

Mr. A. Easwara Pillai: I second it. Sir, I want to make an observation that the Select Committee formed for the purpose of considering the Krishnanvaka Marumakkathayam Bill may be empowered to take evidence.

President: Order, order. It is expected that all honourable members should be alert. We have passed from that subject and have taken up the next one on the agenda, that is The Hindu Women's Rights to Property Bill. But I understand that the honourable member wants that liberties should be given to the Select Committee to take evidence. That is noted. What is the time within which the Select Committee is expected to submit its report?

Mr. K. R. Elenkath: Within two months.

Mr. M. K. Ananthasiva Aiyar: I oppose the motion moved by the honourable member Mr. G. Narayana Aiyar. The present mode of giving maintenance to the childless widow in a Mithakshara family is a long-established usage. The custom is to fix the amount of maintenance consistent with the needs of the widow and the status of the family from whom she claims maintenance. The needs of a childless widow are limited, but at the same time, the needs of her husband's family are far more. Her position has undergone a vast change with her becoming a widow. Her family cannot grow. Nobody approaches her for even subscriptions. Generally the good feeling and natural affection of a childless widow is found to be inclined more towards the members of her original family than to the members of her husband's family. Naturally if the widow is allowed to possess more than what is required for her expenses, she will only allow such excess to flow into the hands of the members

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of her original family. This cannot be allowed. Further, when she has only a life interest over the properties which may be conferred upon her under the Bill which is sought to be introduced she may not care to improve the properties and keep them in good condition. I do not think that the members of the community or communities who may be affected by the proposed legislation would agree to the proposal. The consensus of opinion of the people who may be affected has not been taken.

The motion whether Mr. G. Narayana Aiyar has the leave of the House for introducing his Bill was then put to vote and carried.

Leave was granted to introduce the Bill.

Mr. Kochikal P. Balakrishnan Tampi: Sir, I beg leave of the House to withdraw my motion for the amendment of the Standing Orders in view of the fact that the other House has expressed its opinion in regard to this. Moreover, Sir, I do this in deference to the opinion of some of the honourable members who seem to be persistent against early rising.

Mr. T. K. Kitten (*Vaikam, Kottayam and Changanachery* Cum *Peermade*, തിരുവനന്തപുരം നഗരത്തിൽ സ്ഥാപിച്ചിട്ടുള്ള ആയുർവേദധന്വന്തരി ആശുപത്രിയുടെ മാതൃകയിൽ തിരുവിതാംകൂറിലെ മുഖ്യനഗരങ്ങളായ നാഗർകോവിൽ, കൊല്ലം, ആലപ്പുഴ, കോട്ടയം ഈ നഗരങ്ങളിൽ ഗവണ്മെൻറുവകയായി ആയുർവേദധന്വന്തരി ആശുപത്രികൾ സ്ഥാപിക്കണമെന്നു ഈ കൌൺസിൽ ബഹുമാനപ്പെട്ട ഗവണ്മെൻറിനോട് ശുപാർശചെയ്യുന്നു"

ഈ പ്രമേയത്തെ ഞാൻ ഇവിടെ അവതരിപ്പിച്ചുകൊള്ളുന്നു.

സർ, ആയുർവേദവൈദ്യത്തിൽ ജനങ്ങൾക്കു ഇപ്പോൾ വലിയവിശ്വാസമുണ്ടായിരിക്കുന്നു. ഫ ഫ ഫ ഫ-ലെ ഒരു കണക്കു ഇവിടെ പറയുകയാണെങ്കിൽ ജനറൽആശുപത്രിയിൽ ചികിത്സിച്ചിട്ടുള്ളവരുടെ സംഖ്യ വന്നതു ൈ ര്-ം അതേസമയം ആയുർവേദആശുപത്രിയിൽ ചികിത്സിച്ചിട്ടുള്ളവരുടെ സംഖ്യം ൈ വ്യ വന്നതു-ം ആണെന്നു കാണാം. ജനറൽ ആശുപത്രിക്കുവേണ്ടി ൨ ലക്ഷത്തിൽ ചിലപ്പോൾ രൂപായും ആയുർവേദാശുപത്രിക്കു പന്തീരായിരത്തിൽ ചിലപ്പോൾ രൂപായുമാണു ചെലവു ചെയ്തിരിക്കുന്നതു്. എന്നാൽ ഇത്രയും കുറഞ്ഞ ഒരു തുകകൊണ്ടു ഇത്രയും വലിയ ഒരു സംഖ്യ ദീനക്കാരെ ചികിത്സിക്കാൻ കഴിഞ്ഞ ഒരു ഡിപ്പാർട്ടുമെൻറിനു പൂർവ്വാധികം പ്രോത്സാഹനം നൽകണമെന്നാണു് ഞാൻ പറയുന്നതു്, ഇതുകൊണ്ടു് ഇംഗ്ലീഷ് ഔഷധശാലകൾ കുറക്കണമെന്നതല്ല മാകുന്നില്ല. അവിടെ ശസ്ത്രക്രിയ, എക്സ്റെ മുതയായ പല പ്രയോജനപ്ര

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ദമായ സംഗതികളും നടക്കുന്നുണ്ട്. അതെല്ലാം ആവശ്യവുമാണ്. എന്നാൽസാധുജനങ്ങൾക്ക ആയുർവേദാശുപത്രിയാണ് വളരെ ഉപകരിച്ചുകൊണ്ടിരിക്കുന്നത്. രണ്ടുലക്ഷം രൂപയോളംവരുന്ന തുക ചെലവുചെയ്യുന്ന ജനറലാശുപത്രിയിൽ ചികിത്സിച്ചിട്ടുള്ള രോഗികളുടെ സംഖ്യയോട് അടുത്ത ഒരു സംഖ്യ രോഗികളെ ആയുർവേദാശുപത്രിയിൽ ചികിത്സിച്ചിട്ടുണ്ടെന്ന ഞാൻ മുൻപുരേഖ കണക്കുകൊണ്ടു കാണാം. ശതമാനക്കണക്കുപറയാൻ വളരെ വിഷമമാണ്. ഏതായാലും ആയുർവേദചികിത്സാസമ്പ്രദായത്തിനു കൂടുതൽ പണം ചെലവുചെയ്യേണ്ടതാണ്. ഇതിൽ ആക്ഷേപം അഭിപ്രായവ്യത്യാസത്തിനവകാശമില്ലാത്ത ഒരു സംഗതിയായതുകൊണ്ട് സഭ ഇതിനെ അനുകൂലിക്കുമെന്നു ഞാൻ വിശ്വസിക്കുന്നു.

ആയുർവേദചികിത്സ ഭാരതത്തിലെ പുരാതനചികിത്സാസമ്പ്രദായമാണ്. ഇംഗ്ലീഷ് ചികിത്സാസമ്പ്രദായം ഇടക്കാലത്താണ് ഇവിടെ വന്നത്. ഇംഗ്ലീഷ് ചികിത്സ വന്നതോടുകൂടി ആയുർവേദത്തിനു കുറെ ഉടവുതട്ടി. ഇപ്പോൾ അതു പുനരുദ്ധരിച്ചുവരികയാണ്. ആയുർവേദചികിത്സ ഇപ്പോൾ ഒരു നല്ലനിലയിൽ എത്തിയിരിക്കുന്നു എന്നു പറയുന്നതിൽ വലിയ തെറ്റില്ല. ഇപ്പോഴത്തെ ആയുർവേദഡയറക്ടർ വൈദ്യവിഷയത്തിൽ കേരളത്തിലെന്നല്ല, ഭാരതത്തിൽതന്നെ ഉയർന്ന ഒരു സ്ഥാനം ഉള്ള ആളാണ്. അഷ്ടവൈദ്യപ്രമുഖനും "ധന്വന്തരിദാസ്" എന്ന് അപരനാമമുള്ള മാന്യനുമാണ് ഇന്നത്തെ ഈ ഡിപ്പാർട്ടുമെൻറിന്റെ അദ്ധ്യക്ഷൻ. ആയുർവേദം ജനങ്ങൾക്കു ഉപയോഗയോഗ്യമാക്കണമെന്നു ഗവണ്മെൻറു വിചാരിക്കുന്നപക്ഷം ഈ ഡയറക്ടർ ഇവിടെയിരിക്കുന്ന ഈ സന്ദർഭം ഒരു നല്ല ഘട്ടമാണ്. ഈ സന്ദർഭം തെറ്റിയാൽ ഇതുപോലെയുള്ള ഒരാളിനെ ഡിപ്പാർട്ടുമെൻറദ്ധ്യക്ഷനായി കിട്ടുകയെന്നുള്ളതു വിഷമമാണ്. അതിനാൽ ഈ വിഷയത്തിൽ ബഹുമാനപ്പെട്ട ഗവണ്മെൻറിന്റെയും ഈ സഭയുടെയും ശ്രദ്ധ പതിയണമെന്ന അപേക്ഷിച്ചുകൊണ്ടു ഞാൻ ഈ പ്രമേയത്തെ ഇവിടെ അവതരിപ്പിച്ചുകൊള്ളുന്നു.

Mr. Kochikal P. Balakrishnan Tampi: Sir, I second the motion. I am glad that Mr. Kitten has realised the necessity of opening Ayurvedic Hospitals in the important Municipal areas in the State. He has pointed out the popularity of the Ayurvedic Hospital. Incidentally, I may say that our Government have been consistently patronising the Ayurvedic System, and long before the Raja of Panagal in Madras or the Government of Ceylon took up the question of organising the Ayurvedic treatment, our State had organised the Department and started

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hospitals also. But of late, during the last decade, I am afraid, the Government had been resting on the oars of the past reputation and not doing anything to increase the usefulness or the popularity of the institutions already opened. In spite of the routine attitude to the Department—if I can speak so without offending the susceptibilities of my friend Mr. Govindan over here—the Ayurvedic institutions, the Hospitals and Vaidyasalas have been very popular indeed.

Incidentally, I may mention that this is a branch of learning in which we could specialise in Travancore. A college or an institution in which the Vaidyans could be trained could be opened and all modern excellences in surgery could be combined with the old system of Ayurvedic treatment. We owe it not only to Travancore but to the rest of India, Ceylon and Burma, because many persons under the guise of being Ayurvedic Doctors of Malabar actually go about practising curious systems of medicine and quackery in the great metropolitan cities of India. Even the Ayurvedic quacks have become popular there. Personally, I know some of them who have set up themselves as Ayurvedic Doctors and have changed their terminology, in Bombay and in Madras. This is the general observation I have to make.

Coming to the specific resolution, certainly, I wholeheartedly support the resolution, because, inspite of the many Allopathic Institutions in and out of Alleppey—I am speaking with particular reference to Alleppey—I can not say that medical aid is available to all the poor people of Alleppey and the suburbs. These are days when we are developing a new system of treatment, namely, psychotherapy. When a person thinks that the coloured waters of Allopathy could cure him, it may be very good. But when he believes that no advantage would be gained by that treatment, then, certainly, he must be given the treatment which he believes is effective. The people of our country have a natural and inherent bias in favour of the indigenous system of medicine. With reference to the principles of psychotherapy, also I would say that the people of Travancore should be given facilities for getting expert treatment in the indigenous systems. The sum involved here will not be very considerable, especially in starting hospitals.

I, therefore, wholeheartedly support the resolution of my friend Mr Kitten.

Mr. V. S. Arumukham Pillai: Sir, in so far as it relates to the establishment of an Ayurvedic Hospital at Nagercoil, I oppose the resolution.

Mr. Nedumangad R. Kesavan Nair: Sir, the member is not loud enough.

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President: The honourable member will raise his voice.

Mr. V. S. Arumukham Pillai: Sir, I oppose the resolution in so far as it relates to the establishment of an Ayurvedic Hospital at Nagercoil. I also beg to add that it is an insult offered to the Tamilians as a class, to the Tamilian medical science and the Tamil medical institutions.

The people of South Travancore and the Tamilians as a class have been agitating for a long time for the development of the Sidha Medical institution and Sidha Medical Science. But as is usual with all Tamilian agitations, the Government have been treating them with scant courtesy. The object of encouraging the indigenous systems of medicine is to offer cheap medicine and medical aid to the bulk of the population. This cheap medical aid is entirely denied to the Tamilians as a class. Sir, the Tamilians form about one sixth of the population of the State and a fair portion of the State revenue, namely one sixth, is being contributed by the Tamilians. It is only fair and reasonable that a fair proportion of the revenues of our State are contributed and allotted by the State to the development of this system of medicine.

I may in this connection, draw the pointed attention of the Government to the establishment of the Sidha branch in the Ayurveda College. I submit that the establishment of a Sidha branch and the development of the Tamil science will not only bring cheap medical aid to the bulk of the population, who form the subjects of His Highness the Maharaja, but it will also have a healthy influence as the Ayurvedic system itself.

Mr. Nedumangad R. Kesavan Nair: May I know whether there is any difference between the Ayurvedic System and the Sidha System ?

Mr. V. S. Arumukham Pillai: Yes, there is a lot of difference. I shall submit in this connection that even the Ayurvedic names of medicines cannot be pronounced.....

Mr. Kochikal P. Balakrishnan Tampi: I would like to ask the honourable member whether Unani quacks, I mean, whether the Sidha quacks kill more people than the Ayurvedic quacks.

Mr. V. S. Arumukham Pillai: We are not concerned with eccentrics, lunatics and all those. We are concerned with medical science and the development of the Sidha System. The Tamilians who form one sixth of the population cannot take to Ayurveda because it is foreign to them. Ayurveda is quite unsuited to their culture and habits. Sir, the net result, therefore, is that one sixth of the population of the State is deprived of cheap medical aid. I was submitting that it is highly essential that this

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system should be developed and a branch opened in the Ayurvedic College itself. I also submit that the establishment of the branch will have a healthy influence on the Ayurvedic science itself, because there are certain treatments which are peculiar to the several systems which are quite unknown.

Mr. Kochikal P. Balakrishnan Tampi: Sir, I raise a point of order. The resolution is about the Ayurvedic Hospital. Is the member in order to dilate upon other topics?

President: What he apparently says is that the Sidha system has been so thoroughly neglected that he will not vote for the Ayurvedic Hospital. If possible, the honourable member can consider the expediency of moving an amendment with the object of giving greater attention to the Sidha System also. I leave it to the honourable member.

Mr. V. S. Arumukham Pillai: Sir, it is now too late. Therefore, my point is that an Ayurvedic Hospital is not necessary in Nagercoil and it is an insult and the...

Mr. M. Govindan: May I know whether there is at present an aided Ayurvedic Hospital at Nagercoil which is resorted to by a large number of patients.

Mr. V. S. Arumukham Pillai: It is generally resorted to only by the Government servants there and by the people of Northern and Central Travancore who have come down to Nagercoil. Local people do not resort to that hospital.

Mr. A. Easwara Pillai: May I ask whether the Allopathic system is an insult to South Travancore and to the Tamilians?

Mr. V. S. Arumukham Pillai: No; it is common to Tamilians and non-Tamilians. My objection is only to that system which is favoured by a set of people who are unsympathetic towards the Tamilians, and who consider them as aliens; it is there that our feeling gets embittered.

Mr. T. Mahomed Ismail: I support the resolution. At the same time, I do not oppose starting any other indigenous system of treatment, *Siddha Vaidiyam* or *Unani*. I support the resolution because I fully believe that it is a cheaper form of treatment than the Allopathic system and poor people in the moffusil and in village parts are quite satisfied with its efficacy. We all know, Sir, what the common people feel in the matter. They think that it is easier to approach the Ayurvedic doctor and to take him to their houses for treatment. He willingly walks to poor houses and does not insist on motor cars. It is easier to pay him also; you

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Mr. T. Mahomed Ismail.]

just have to pay 8 annas or so as fees for the physician, over and above the price of the medicine which also is always low. In the case of the Allopathic doctors, who are suited and booted, although they themselves do not insist on or demand any fees, there is a general feeling among the people themseles that anything less than Rs. five per visit would be too low and not decent enough. Somehow, it is a fact that all Allopathic doctors are paid such fat fees.It is the general impression current among the people that Allopathic doctors first feel the purse of the person calling them before they feel the pulse of the patient. Therefore, there is no doubt that the indigenous systems of treatment are cheaper.

In regard to efficacy also, the figures published in the departmental reports as pointed out by the mover of the resolution show that the Ayurvedic system is considered to be better than the Allopathic system.

Therefore, Sir, if the Government have the interest of the people at heart, they should establish Ayurvedic hospitals not only in big towns as recommended by the mover of the resolution but also in all our villages. However if the Government find financial difficulties in the matter of establishing hospitals in all the villages in the State immediately, they should establish such hospitals at least in the important towns. I therefore heartily support the resolution.

Mr. Nedumangad R. Kesavan Nair : Sir, I support the resolution. There is certainly no question as to the efficacy of the Ayurvedic system of treatment ; it has been proved that the Ayurvedic system is superior to Allopathy for curing certain diseases. When, in South Travancore, there was an outbreak of malaria while the Allopathic experts were not able successfully to combat the disease, the few Ayurvedic physicians that were sent there were able to give a more effective treatment. The results were more satisfactory, and the expenditure involved was much less. There is therefore no question as to the efficacy of the Ayurvedic treatment.

As Mr. Ismail observed, the middle and the poorer classes can well afford Ayurvedic treatment but not Allopathy ; and in point of efficacy Allopathy is not in any way superior to Ayurveda.

My friend Mr. Arumukham Pillai referred to the Sidha system. I whole-heartedly support him particularly in view of the fact that the Sidha Vaidya Samajam has been recently established at Minjara I understand that they have sent up memorials to the Government requesting their patronage and encouragement for this neglected system of treatment. There is absolutely no question as to whether that system of treatment would be successful or not ; because it has been tried and found as successful as Ayurveda or any

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other system. Therefore, at least in South Travancore, in Nagercoil for instance, it is very necessary to establish a Sidha hospital.

Sir, in regard to the comparative efficacy of the Allopathic system, I find from a perusal of the departmental reports for the years 1111 and 1112, that the Ayurvedic system has proved more efficacious than Allopathy. In the year 1111, 94 per cent. of the patients who resorted to the Ayurvedic system were successfully cured, and in the year 1112 the percentage is 97. On the other hand, as can be seen from the report of the Medical Department, the percentage of patients cured by Allopathy is much lower. It is therefore highly necessary that the Government should allot more funds for Ayurveda ; at least, they should patronoise and encourage the system in the particular localities mentioned by my friend Mr. Kitten.

There is also one more point which I would like to submit in this connection. I find that already grants are being given to certain institutions in Quilon, Kilimanoor and Nagercoil. The resolution speaks of establishing Ayurvedic hospitals at Nagercoil, Quilon, Alleppey and Kottayam. Therefore, the amounts disbursed by way of grants to the Ayurvedic hospitals at Nagercoil and Quilon have to be taken into account in considering the additional expenditure involved in the proposal contained in the resolution. I hope this modest resolution will commend itself to the Government.

Mr. G. Narayana Aiyar : I support the resolution. I may at the outset submit that the public have full confidence in the Ayurvedic system of treatment. The very name Ayurveda indicates what the system is and how comprehensive it is. It has been in existence from time immemorial. There is no doubt that it is less expensive than Allopathy. There are certain diseases for which there are no proper medicines or treatment under Allopathy while there are methods of safe treatments under Ayurveda. For instance in the case of rheumatism and mental diseases, while the Allopathic doctors say that they have no specifics, the Ayurvedic physicians are able to suggest remedies and to treat the patients successfully. Further, systems of treatment such as *pizhichal* and *kizhi vasty*, etc., which are a palliative for all sorts of complicated diseases, have no corresponding substitutes in Allopathy. Further, as has been already stated, Ayurveda is very cheap and quite suited to the poverty-stricken masses of our country. Therefore, it has to be encouraged sufficiently.

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[Mr. G. Narayana Aiyar.]

I may in this connection, Sir, submit that, in almost all resolutions and motions during the voting of grants, the activities of this House seem to be confined wholly to certain specific localities in the State say from Kottayam to Nagercoil. Nobody seems to take any trouble over the other parts of the country especially the northern taluks. Everybody wants all Government institutions to be centred round the four important towns in the State. Sir this deplorable state of affairs should not be allowed to continue any longer. Other parts of the country are also entitled to kind treatment at the hands of the Government. The taluks of Parur, Kunnatnad and Muvattupuzha, for instance, also contribute to the revenues of Government. I would submit therefore that it is highly necessary to establish Ayurvedic hospitals in the northernmost frontier where the people find it very difficult now to go to the distant hospitals.

I would also suggest the need for standardisation of Ayurvedic medicines. Now, there are numerous shops selling almost all the Ayurvedic medicines. Nobody knows whether the medicines contain all the prescribed ingredients, in the prescribed proportion. There is no method of ascertaining that. In the case of Allopathy for instance, we know what the patent medicines are and what their constituents are, and there is some kind of guarantee that the medicines are really what they are said to be. That is not the case with Ayurvedic medicines like *tailams ghrithams* and other medicines. When the physician prescribes a particular medicine for a particular disease we immediately go to one of these shops and buy it; and it often happens that the medicine is not effective. That is not because of the physician. The defect lies in the constitution of the medicine. Therefore, some system has to be found out by the Government to assure us that the Ayurvedic medicines sold in shops do contain all the necessary ingredients.

Mr. M. Govindan : Does not my friend think that it would be better and safer to extend the Ayurvedic system to the various towns as proposed by Mr. Kitten, before standardising the various medicines ?

Mr. G. Narayana Aiyar : Certainly. The establishment of more Ayurvedic hospitals need not wait till the standardisation of medicines which process will necessarily take some time.

Mr. N. V. Chacko : Sir I beg to support the resolution, of course, without condemning other systems of medicine. But I should add that Ayurvedic hospitals, should be established also in other important centres like Muvattupuzha, Perumbavur, Alwaye, Parur, Puthenkurisu and other places ; that is a matter in which my friend Mr. G. Narayana Aiyar has anticipated me.

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There is one great advantage in the Ayurveda system which we do not have in Allopathy. While, under the Ayurvedic system of treatment, the cure is lasting and almost permanent, in Allopathy, not only is it not lasting but it also injuriously affects the general health of the patient in some cases. For example, if you take quinine for malaria, you are sometime affected and a general break down in health is noticed. But if you take *Indu Kanta Ghritham*, on the other hand, it not only cures malaria but also improves the general health of the patient. I do not know if the honourable the Surgeon-General is aware of it.

I would therefore heartily support the resolution and request the Government to establish Ayurvedic hospitals in the northern taluks also.

Mr. C. N. Thuppan Nambooripad (*Travancore Jenmies*) : ഞാൻ ഈ പ്രമേയത്തെ അനുകൂലിക്കുന്നു. ആയുർവേദചികിത്സ ഈ രാജ്യത്തെ ജനങ്ങൾക്ക് കൂടുതൽ ഇഷ്ടമുള്ള തെന്നാണെന്ന് ഇതിനുമുൻപ് ഗവണ്മെൻറിനു പല അവസരങ്ങളിലും ബോദ്ധ്യപ്പെടാൻ ഇടയായിട്ടുണ്ട്. അതിന്റെ ഫലമായിട്ടാണ് ഗവണ്മെൻറ് ഒരു ആയുർവേദ ഡയറക്ടരെ ഇവിടെ നിയമിച്ചിട്ടുള്ളത്. ഇന്നത്തെ ഡയറക്ടരെക്കാൾ കൂടുതൽ യോഗ്യതയുള്ളവരായി അധികം കാണുമെന്നു ഞാൻ വിചാരിക്കുന്നില്ല. ആ ഡിപ്പാർട്ടുമെൻറിനെ പരിഷ്ക്കരിക്കാൻ ഇപ്പോൾ പറഞ്ഞ ഒരവസരവുമാണ്. ആയുർവേദ ചികിത്സയുടെ ഗുണത്തെപ്പറ്റിയും മറ്റും പറഞ്ഞു് ഇപ്പോൾ സമയം കളയേണ്ട ആവശ്യമുണ്ടെന്നു തോന്നുന്നില്ല. ആയുർവേദാഭിവൃദ്ധിയെപ്പറ്റി പരിഗണിക്കുമ്പോൾ പ്രധാനമായി നോക്കേണ്ടതു് ഔഷധത്തെ സംബന്ധിച്ചാണ്. നാട്ടിൽതന്നെ മരുന്നുകൾ നട്ടുവളർത്തുന്നതിനായി ഗവണ്മെൻറ് ഒരു സ്കീം ഉണ്ടാക്കിവരുന്നു എന്നു ഞാൻ അറിയുന്നു. ആയുർവേദ ഡിപ്പാർട്ടുമെൻറുകാരുടെ സഹായത്തിനുംപുറമെ, ഫാറസ്റ്റ് ഡിപ്പാർട്ടുമെൻറുകാരുടെ സഹായവും ഇതിനുണ്ടാകേണ്ടതാണ്. വനങ്ങളിൽ മനുഷ്യപ്രയത്നം യാതൊന്നും കൂടാതെതന്നെ അനവധി ഔഷധങ്ങൾ ഉണ്ടായിവരുന്നുണ്ട്. അവയെല്ലാം ഇപ്പോൾ ഉപയോഗമില്ലാതെ, ആരുമാരുമറിയാതെ തള്ളിക്കളയുന്നു. അതുകൊണ്ട് ഔഷധങ്ങൾ കൂടുതലായി നട്ടുപിടിപ്പിക്കുന്നതിനും ഉള്ളവയെ ആയുർവേദഡിപ്പാർട്ടുമെൻറുകാരുടെ സഹായസഹകരണങ്ങളോടുകൂടി ശരിയായവിധം സംരക്ഷിച്ചുവരുന്നതിനുമുള്ള ചുമതല ഫാറസ്റ്റ് ഡിപ്പാർട്ടുമെൻറിനുള്ളതായിരിക്കണം.

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[Mr. C. N. Thuppan Nambudirippad]

ഇപ്പോൾ നാല് സ്ഥലത്തു ക്ലൂതലായി ആയുർവേദ ആശുപത്രികൾ സ്ഥാപിക്കണമെന്നാണ് പ്രമേയത്തിൽ കാണിച്ചിരിക്കുന്നത്. അത് ഇവിടെ വന്നപ്പോൾ വേറെ ചില ദിക്കിലേക്കുംകൂടി സ്ഥാപിക്കണമെന്നും ആവശ്യപ്പെട്ടന്നതായി കണ്ടു. ഒരു സ്ഥലത്തു് ഇതിന്റെ ആവശ്യമില്ലെന്നു പറയുന്നതും കേട്ടു. ഞാൻ പറയുന്നത് ടൗണുകളിൽ അല്ല ആയുർവേദ ആശുപത്രികൾ സ്ഥാപിക്കേണ്ട ആവശ്യമുള്ളത്. ടൗണുകളിലുള്ള ഇംഗ്ലീഷ് ആശുപത്രികൾ ഇപ്പോൾ മാറ്റാൻ സാധ്യമല്ലല്ലൊ. അതുകൊണ്ട് ടൗണിനോട് ഏറ്റവും അടുത്തു്, രണ്ടോ മൂന്നോ മൈൽമാറി ആയുർവേദ ആശുപത്രികൾ സ്ഥാപിക്കുന്നതു നന്നായിരിക്കും. ഇങ്ങനെ സ്ഥാപിച്ചാൽ ടൗണിൽ ഇരിക്കുന്നവർക്കും ഇതിനെ ഉപയോഗപ്പെടുത്താൻ സൌകര്യമുണ്ട്.

സിദ്ധവൈദ്യത്തെ സംബന്ധിച്ച് ഇവിടെ പ്രസ്താവിക്കയുണ്ടായി. ഇതിനെപ്പറ്റി പ്രസംഗിച്ച മെംബർ ഇംഗ്ലീഷിൽ പ്രസംഗിച്ചതുകൊണ്ടു സിദ്ധവൈദ്യത്തെപ്പറ്റി അദ്ദേഹം പറഞ്ഞതെന്താണെന്നു ശരിയായി എനിക്കു മനസ്സിലാക്കാൻ കഴിഞ്ഞില്ല. മാളവ്യജി മുതലായ ആളുകൾക്ക് കല്പചികിത്സ നടത്തിയതായും അതു വളരെ പ്രയോജനപ്പെട്ടതായും ഞാൻ കേട്ടു. കല്പചികിത്സ വളരെ നല്ലതാണെന്നറിയുന്നു. അഷ്ടാംഗഹൃദയപണ്ഡിതന്മാരിൽ ചിലരോട് ഈ കല്പചികിത്സയെപ്പറ്റി ഞാൻ ചോദിക്കുകയും ഉണ്ടായി. ഇതേപ്പറ്റി ആയുർവേദപുസ്തകങ്ങളിൽ പറയുന്നുണ്ടെങ്കിലും ഒരു നല്ല വൈദ്യന്റെ മേൽനോട്ടത്തിലും ശിക്ഷണത്തിലുംമാത്രമെ ചികിത്സ നടത്താവൂ എന്നും അങ്ങനെ ചെയ്തില്ലെങ്കിൽ ചികിത്സയിൽ വലിയ തകരാറുകൾ വരാൻ ഇടയുണ്ടെന്നും അവർ പറയുകയുണ്ടായി. സിദ്ധവൈദ്യം നടപ്പിൽവരുത്തുന്നതു നല്ലതാണു്. പക്ഷെ നല്ല ഒരു സിദ്ധവൈദ്യന്റെ സഹായത്തോടുകൂടി അതു നടപ്പിൽ വരുത്തണം. പാമ്പാടിയിൽ ഒരു സിദ്ധവൈദ്യൻ ഉണ്ടായിരുന്നു. വരുന്നവക്കെല്ലാം കുറെ വെള്ളം കൊടുക്കും. വെള്ളവും കുടിച്ചുകൊണ്ടു വന്നവർ പോകും. ഒരു വിശേഷവുമില്ല. ഞാനും അവിടെ പോയിട്ടുണ്ട്. രണ്ടുപ്രാവശ്യം വെള്ളം ഞാനും കുടിച്ചു. എന്റെ വയറിൽ വേദന ഇതുവരെ മാറിയില്ല. അപ്രകാരമുള്ള സിദ്ധവൈദ്യന്മാർ നമുക്കാവശ്യമില്ല. പാണ്ഡിത്യവും പരിചയവും ഉള്ളവരെ നോക്കി നിയമിക്കണം. ഏതായാലും ക്ലൂതൽ ആയുർവേദ ആശുപത്രികൾ സ്ഥാപിക്കണമെന്നുള്ള ഈ പ്രമേയത്തെ ഞാൻ അനുകൂലിച്ചുകൊള്ളുന്നു.

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Mr. K. R. Elenkath: Sir, I rise to offer a few observations on some of the points that have been raised. Sir, it needs no saying that the Ayurvedic system of treatment is the cheapest and the most easily available system of treatment in the State. Looking from that standpoint I should think that easy access to efficient physicians in important centres throughout the State is a thing to which no member of this House can object. But with regard to locating these hospitals in the particular towns mentioned in the resolution, I am entirely in agreement with the opinion expressed by my predecessor that they should as far as possible be a means of giving help to really needy persons but not to persons who have all facilities in the towns. I should think that the towns which have been referred to in the resolution may be altered into divisions and that in the case of Nagercoil it may be the P. W. Division instead of the Revenue Division. What I would suggest is that as far as possible, where we have an overlapping of medical conveniences we shall not go in for more institutions. On the other hand it will be more advantageous and beneficial if you locate these hospitals in areas which are near the towns and at the same time within reach of the rural areas.

With regard to the contemplation by Government of having a few central Allopathic hospitals in some of the main towns in the State, I should think that this question should be waived in the light of this resolution. If the central Allopathic institutions are to be located at Nagercoil, Quilon, Alleppey and Kottayam, I should think that there will be overlapping and unnecessary expenditure if Ayurvedic institutions are to be had in the very same places. So, the location of hospitals has to be considered along with the re-organisation of the central Allopathic hospital system.

With regard to locating a hospital at Nagercoil I would suggest that Neyyattinkara may be substituted for Nagercoil, because Neyyattinkara is an area which is very often stricken with malaria.

Mr. M. K. Ananthasiva Aiyar: May I know whether there is a dispensary at Neyyattinkara at present?

Mr. K. R. Elenkath: Yes. When the scheme of central Allopathic hospitals come it will become a dispensary. That is my idea. Then all these minor hospitals will become dispensaries and a few central hospitals will be available in the big towns. As I find that Mr. Arumugham Pillai is amenable to it, I will advocate the cause of South Travancore and suggest that the proposed hospital for Nagercoil may be shifted to Neyyattinkara.

Mr. M. Govindan: Does the member want Ayurvedic treatment or Siddha Vaidya treatment?

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Mr. K. R. Elenkath : I am coming to that. Ayurveda system has been a recognised one and all people have confidence in it. Coming to the Siddha Vaidya system of treatment, I am not one who is opposed to popularising it. On the other hand if this system is well developed, it will be of immense good to the people. But it must be in the hands of experts and not quacks. When compared with the Ayurveda system the Siddha Vaidya system has its own risks because only experts can find real remedy for diseases.

Mr. Nedumangad R. Kesavan Nair : May I know from the member whether there are no experts for the Siddha Vaidya system of treatment ?

Mr. K. R. Elenkath : There are. I am thankful to the member for reminding me by his question of his speech at the Siddha Vaidya Samajam at Munchira. That is the only association where the expert physicians of all parts of Travancore meet and discuss matters. Having regard to that I am of opinion that the Government should have a control over it and the Ayurveda institutions may have the help of the Siddha Vaidya experts. There is the Ayurveda College and we have an expert in the Siddha Vaidya system and if Government is to encourage the system, they must have a proper person to supervise and see that the aid given to institutions and vaidyans is properly utilised and given to the most competent persons. With these words I support the resolution.

Mr. V. S. Arumugham Pillai : Sir, before the official member rises to speak, I may be permitted to move the following amendment. My amendment is to delete "Nagercoil" and to add at the end of the resolution "and a Siddha Vaidya hospital at Nagercoil," With the amendment the resolution will read thus :

> "This council recommends to the Government that free Ayurveda hospitals be established in the towns of Quilon, Alleppey and Kottayam and a Siddha Vaidya hospital at Nogercoil."

Mrs. Aberanam Gnanasikhamoni (*Nominated*) : I second it.

Mr. C. O. Madhavan : Sir, speaking first about the motion brought forward by Mr. T. K. Kittan I may at once inform him that the Government have long since realised the growing popularity of the Ayurvedic system of treatment. The Ayurvedic Department was organised in Travancore about 50 years ago and a College for the teaching of the Ayurveda system of treatment was also established at almost the same time. Men and women who got out of the College have been opening dispensaries and hospitals in different parts of the state and the Government have been granting recognition and giving grants to these dispensaries and hospitals so much so that we can now see an Ayurvedic dispensary in almost every part of Travancore.

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Coming to the question of hospitals, which is directly the subject matter of the resolution of Mr. T. K. Kittan, I may inform the House that at present there are aided Ayurvedic hospitals in Nagercoil, Quilon and Kilimanoor, besides the Departmental hospital conducted in Trivandrum itself. A similar resolution for the establishment of Ayurvedic hospitals in all important towns in the State was moved in a session of the Sri Mulam Assembly in November last by Mr. T. P. Velayudhan Pillai and the resolution was passed in that House. In pursuance of that resolution the question was referred to the Director of Ayurveda and the matter is now under his consideration. It may be expected that when he submits his report, the Government will take up the question of opening more hospitals in places where they are most needed and are likely to be most useful. I may also inform the House that the Government have now, as the House already knows, appointed as the Head of the Department of Ayurveda one of the most eminent Ayurvedic physicians not only in Travancore or Kerala but in the whole of South India and we may trust him to develop the Department to its fullest possible extent of utility to the people.

Coming to the amendment of Mr. V. S. Arumugham Pillai, I may inform him that the Government have not been overlooking the usefulness of the Siddha Vaidya system of treatment. At present there are six Siddha Vaidyans receiving a grant of Rs. 15 each per mensem from the Government. There is a Siddha Vaidya Ashram opened at Munchira by a sanyasin,

He has approached Government for help in the direction of a site and building grant and in other ways too. That question also has been referred to the Director of Ayurveda and when he submits his report Government will certainly pay due attention to the recommendations of the Director.

Mr. V. S. Arumugham Pillai: May I know whether there was not a special allotment for the development of Siddha medical science in the last year's Budget ?

Mr. C. O. Madhavan: Without looking into the papers I cannot say anything definitely about it. If at all it might be included in the Budget for the Department of Ayurveda. I am subject to correction, because I am speaking without reference to the Budget. What I want to impress on the House is that this system of treatment has not been completely ignored by the Government.

So far as the opening of hospitals is concerned, it is not known whether there are persons who possess the requisite qualifications to conduct a Siddha Hospital on a satisfactory basis. At Nagercoil there is a flourishing Ayurvedic hospital. I do not want to enter into any controversy regarding the relative popularity of the

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[Mr. C. O. Madhavan.]

Ayurvedic and the siddha systems of treatment in the Tamil parts of the country. All that I wish to say is that the Siddha Vydia system of treatment also is receiving all possible consideration at the hands of the Government. As the Government are doing all that the resolution wants, either with or without the amendment the honourable mover may consider whether there is any real necessity for pressing his resolution.

Mr. T. K. Kittan: ഇതു വളരെ അത്യാവശ്യമുള്ള ഒരു സംഗതിയാണ്. സാധുക്കളായുള്ളവർക്കു വൈദ്യസഹായം ലഭിക്കുക എന്നതുള്ളതു് ഒരു നിസ്സാരസംഗതിയല്ല. ഞാൻ അയച്ച പ്രമേയത്തിൽ നാലു സ്ഥലത്തെ പേരുകളാണു പറഞ്ഞിട്ടുള്ളതു്. ഈ രാജ്യത്തു് പ്രധാനമായി ഒരു മുനിസിപ്പാലിറ്റികളാണുള്ളതു്. തിരുവനന്തപുരം, നാഗർകോവിൽ, കൊല്ലം, അലപ്പുഴ, കോട്ടയം എന്നിവയാണ്. ഇതിൽ തിരുവനന്തപുരത്തു് ഇപ്പോൾ ഒരു ആയുർവേദ ധർമ്മാശുപത്രിയുണ്ടു്. ബാക്കി നാലു സ്ഥലത്തും ആയുർവേദ ധർമ്മആശുപത്രികൾ സ്ഥാപിക്കണമെന്നാണു് ഞാൻ ആവശ്യപ്പെട്ടിരിക്കുന്നതു. ജനപ്പെരുപ്പത്തിന്റെ മുറയനുസരിച്ചാണ് പ്രമേയത്തിൽ സ്ഥലങ്ങളുടെ പേരുകൾ ഞാൻ കാണിച്ചിരുന്നതു്. എന്റെ സ്ഥലം കോട്ടയത്താണു്. എന്റെ ആവശ്യംകൊണ്ടായിരുന്നുവെങ്കിൽ പ്രമേയത്തിൽ കോട്ടയം ഒന്നാമതായി ഞാൻ കാണിക്കുമായിരുന്നു. നാഗർകോവിലിലെ ബഹുമാനപ്പെട്ട മെമ്പർ അവിടെ ആയുർവേദ ആശുപത്രിയുടെ ആവശ്യം ഇല്ലെന്നു പറയുന്നു. ആ വിവരം ഞാൻ അറിഞ്ഞില്ല. വേണ്ടെങ്കിൽ വേണ്ട. ബാക്കിയുള്ള സ്ഥലങ്ങളിലെങ്കിലും സ്ഥാപിച്ചുതരണം. ഈ പ്രമേയം വോട്ടിനിടണമെന്നു ഞാൻ അപേക്ഷിക്കുന്നു.

President: The question before the House is the amendment of Mr. Arumukham Pillai to the resolution, which was first placed before the House. It is as follows:

"To delete 'Nagercoil' and insert 'a Siddha Vydia hospital at Nagercoil' at the end."

The motion was put and carried.

The question before the House is the resolution as amended by Mr. Arumukham Pillai which reads as follows.

"This Council recommends to the Government that free Ayurveda hospitals be established in the towns of Quilon, Alleppey and Kottayam and a Siddha Vydia hospital at Nagercoil."

The resolution was put to vote and carried.

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Mr. T. K. Kittan: സർ, ഈ രാജ്യത്തെ ഭിക്ഷക്കാരെ സംബന്ധിക്കുന്ന ഒരു നിവേദനമാണ് ഞാൻ കൊണ്ടുവന്നിട്ടുള്ളത്. പകർച്ചവ്യാധിയുള്ള ആളുകൾ ജനക്കൂട്ടത്തിൽവന്ന് ഭിക്ഷയെടുക്കുന്നതുകൊണ്ട് വ്യാധികൾ ജനങ്ങളുടെയിടയിൽ പകർന്നുകൊണ്ടിരിക്കുന്നു. ഈ സമ്പ്രദായം നിറുത്തൽചെയ്യണമെന്നാണു ഞാൻ പറയുന്നത്. ഈ രോഗങ്ങൾ പകരാതിരിക്കുന്നതിനും ഈ വിഷമതകൾ ഉണ്ടാകാതിരിക്കുന്നതിനുമായി പകർച്ചവ്യാധിയുള്ള ഭിക്ഷക്കാരെ കണ്ടുപിടിച്ച് അവരെ പ്രത്യേകം സൂക്ഷിച്ച് ചികിത്സിച്ച് സംരക്ഷിക്കേണ്ടതാണു. ഇതിനുവേണ്ടി കഴിവുള്ള ശ്രമങ്ങളെല്ലാം ഗവണ്മെൻറു ചെയ്യണമെന്നു ഞാൻ അപേക്ഷിക്കുന്നു.

ഇവിടെയുള്ള ഭിക്ഷക്കാരെ മൂന്നു തരമായി തിരിക്കാം. ഒന്നാമതു ഞാൻ ഇപ്പോൾ പറഞ്ഞ പകർച്ചവ്യാധിയുള്ള ആളുകൾ. രണ്ടാമതു യഥാർത്ഥമായി ഭിക്ഷകൊടുക്കുന്നതിന് അർഹന്മാരായ അംഗഭംഗംവന്ന ആളുകൾ. അവർക്കു രോഗങ്ങൾ ഒന്നുമില്ല. പക്ഷെ കാലൊടിഞ്ഞവരും കൈ ഇല്ലാത്തവരും കണ്ണു പൊടിഞ്ഞവരുമൊക്കെ ആയിരിക്കും. ഇനി മൂന്നാമതു ഒരുകൂട്ടർ ഉണ്ട്. അവർക്കു യാതൊരു സുഖക്കേടുമില്ല; അംഗഭംഗവുമില്ല. അവർക്കു വേലചെയ്തു കഴിയുന്നതിനു പ്രയാസമില്ല. എങ്കിലും ഭിക്ഷവൃത്തിതന്നെ അവർ തൊഴിലായി സ്വീകരിച്ചിരിക്കുന്നു.

President: I hope the honourable member will realise that this resolution cannot be carried into effect without a legislation for the compulsory seggregation of beggars afflicted with contagious diseases.

Mr. T. K. Kittan: ഈ രാജ്യത്തു് ഇതിനെ സംബന്ധിക്കുന്ന നിയമമില്ലെങ്കിൽ ഒരു നിയമം ഉണ്ടാക്കണമെന്നുകൂടി ഞാൻ അപേക്ഷിക്കുന്നു. രാജ്യത്തിൽ അങ്ങനെ ഒരു നിയമം ഉണ്ടാക്കി ഈ ഭിക്ഷക്കാരെ നിയന്ത്രിച്ചില്ലെങ്കിൽ അതു് ഒരു വലിയ ആപത്തുതന്നെയായിരിക്കും. യാചകന്മാർ അവരുടെ ഭാര്യമാരുമായിട്ടാണു് ഭിക്ഷയ്ക്കു നടക്കുന്നതു്. ഇവർക്കു ധാരാളം സന്താനങ്ങളും ഉണ്ടാകുന്നുണ്ടു്. ഇവരെ വേണ്ടവിധം നിയന്ത്രിച്ചില്ലെങ്കിൽ കാലക്രമേണ ഇവിടെ ഒരു "തെണ്ടിസമുദായം" തന്നെ ഉണ്ടാകയില്ലയോ എന്നു ഞാൻ ഭയപ്പെടുന്നു. നിശ്ചയമായും ഇതിനു് ഒരു നിയമംതന്നെ ഉണ്ടാക്കണം

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Mr. K. K. Kuruvila (*Mavelikara and Tiruvalla* cum *Pattanamtitta*): I rise to support the resolution moved by Mr. Kittan. He has graded the beggars into three different sections and I also propose to divide them into three, but on a different basis. I find there are beggars in the locality, there are beggars who come from outside to the locality and a third kind who cannot help themselves. I feel that in the case of the first two types, the municipalities could do a great deal to improve their condition. If the municipalities would pay some attention as to the number of actual beggars in the locality and the number that invade the locality from outside, we may be able to get at some basis on which we can work that problem. I want to deal particularly with the third type. They are people, whom we find often in our streets, people who do not get any outside help and as a consequence whom we have tried to take, at least some of these people, into the hospitals. But the doctors in charge of the hospitals positively refuse to take them in on the ground of want of accommodation in the hospitals. We are led by compassion, but we have no opportunity to exercise our compassion. If there is any opportunity for the socially minded to take these people on the road who are without help and exposed to heat, sun and rain, I think it will be a great blessing to the country. I therefore appeal to the House and you, Sir, to arrive at a device by which the socially minded might be able to take such of these men who cannot help themselves, to the hospitals or to their homes where they can be well provided for.

The other question is whether some legislation is not necessary for the purpose. If necessary that has to be done. I want to emphasise that it is the duty of any civilized State to render all aid to this particular type of people. With these words, I support the resolution.

Mr. C. O. Madhavan: Sir, the resolution moved by Mr. Kittan raises a question which is rather complicated. Here, so far as difficulty in actual experience goes, it is not one of finding...

Mr. T. K. Kittan: ഒരുപടി മലയാളത്തിൽ പറഞ്ഞാൽകൊള്ളാം.

Mr. C. O. Madhavan: May I speak, Sir?

President: It is open to the honourable member to answer in Malayalam if he chooses to do so.

Mr. C. O. Madhavan: Mr. Kittan can understand English very well. He can talk as well. But if the member is really particular, I have no objection to answer in Malayalam.

President: What does the honourable member want?

Mr. T. K. Kittan: ബഹുമാനപ്പെട്ട മെമ്പർ ഒരുപടി മലയാളത്തിൽ പറഞ്ഞാൽകൊള്ളാമെന്നാണ് ഞാൻ അപേക്ഷിക്കുന്നത്.

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President: Why? I am told that—I am subject to correction—the honourable member can read and understand English well. If the honourable member, as the mover of the resolution, cannot follow English, I can well-understand the necessity to have the reply speech in Malayalam, so that he can take any line he likes. But otherwise, if he speaks in Malayalam, it is likely other honourable members may say that they don't follow him; or understand him. Therefore, unless the honourable member can assure the House that he does not follow the member, I have to rule otherwise.

The honourable member will proceed in the language in which he began.

Mr. C. O. Madhavan: The problem is not one of finding accommodation for the beggars. It is one of keeping them in the asylum provided for them. For instance, in the Sri Chitra House for the Destitute and the Infirm, the difficulty experienced, is not for providing accommodation for people who resort to it, but for keeping them there. The men and women who are taken over there are provided with all sorts of comforts and conveniences, but after a few days they prefer going out and roaming about the streets.

Mr. K. K. Kuruvila: Does the member know that there is a poor home in Pudupalli where there are about 40 inmates and who, I understand, are living there very comfortably under the attention of voluntary workers? If you have some such system, does not the member think it advisable to follow that?

Mr. C. O. Madhavan: I accept that information from the member. I must confess that I am not aware of that. But, I am speaking from my own personal knowledge of what takes place here in Trivandrum.

President: The time being 3-30 the House will now proceed to consider the motion for adjournment.

ADJOURNMENT MOTION.

Mr. Kottur Kunjukrishna Pillai: Sir, I rise to make the following motion for the adjurnment of the business of the house:—

> "I beg leave to move for the adjournment of the business of this House for the purpose of discussing a definite matter of urgent public importance, namely, the serious situation caused by the recent and regular assemblage of persons under the name of the All Travancore Youth League prompted and supported by the State Congress culminating in the incidents of the 4th Chingom 1114 (20th August 1938) when in front of the Tampanur Railway Station

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